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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after mat Verified and <input checked="" type="checkbox"/> Allowance Acknowledged Examiner's Signature <i>ch</i> Initials		<b>STATE OR COUNTRY</b> OR	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 44
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<b>FILING FEE RECEIVED</b> 1302	FEES: Authority has been given in Paper No. <u>10/25/01</u> to charge/credit DEPOSIT ACCOUNT No. <u>50-0767</u> for following:		<input type="checkbox"/> All Fees <input checked="" type="checkbox"/> 1.16 Fees ( Filing ) <input checked="" type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	